

Request for Appropriation Budget Template

Enter data into each yellow cell.

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| Request Title: | Programs for Independent Living-DWS |
| Sponsor: | Senator Todd Weiler |

| Step 1. Revenue | | | |
|---|----|------------|---|
| Funding Source | | | |
| Amount Requested | \$ | 900,000.00 | DWS/USOR state general funds |
| Other Revenue Sources | | | |
| Total Revenues: | \$ | 900,000.00 | 900,000 |
| Difference between Revenue & Expenditures | | \$ | - |
| Step 2. Expenditures | | | |
| Amounts | | Details | |
| Personnel | \$ | 487,842.00 | Number of personnel support 68.15 |
| Travel | \$ | 19,526.00 | Nature of travel: Instate and out ofstate travel related expenses for milage reimbursment, airfair travel, lodging and per |
| Equipment/Supplies | \$ | 19,962.00 | Types of equipment/supplies to be purchased: Reflects desk supplies as well as general office supplies, recreation activities, life skills classes, trainings, workshops, includes purchases of additional or replacement office, vehicle and/or |
| Pass-through | \$ | - | Intended recipient(s) of pass-through funds: |
| Licenses | \$ | - | Description of licenses (number, cost per license, |
| Other | \$ | 196,707.00 | Description of other expenses Federally approved and mandated -Indirect cost rate |
| Other | \$ | 87,000.00 | Description of other expenses Fringe Benefits-FICA, which reflects the employer's portion of the Social Security tax and Medicare taxes, unemployment tax and worker's compensation for payroll, as well as, health, dental and other insurance for full time employees, and retirement benefits when applicable. |

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|--|--------------|-------------------------------|---|
| Other | \$ 978.00 | Description of other expenses | Includes the annual audit, tax preparation, human resources, etc. Also includes computer and phone service to maintain systems and network work stations and fix computer and phone related issues, as well as the contract to maintain our office copier equipment. Any necessary professional fees will also be included, such as legal, interpreter services, accounting, architectural, engineering and other consulting fees. |
| Other | \$ 87,985.00 | Description of other expenses | Business Expenses including but not limited to business licenses, employee recruitment, fingerprinting and background checks, association membership dues, bank fees, Insurance for commercial and professional liability, D & O insurance, Maintenance / Repairs including but not limited to building, yard and office maintenance/repairs, Publications / Advertising including but not limited to newsletters, brochures, business cards, Staff and Board Training for conference and/or workshop registration, subscriptions, training materials and presenters. Vehicle Expenses reflects auto maintenance, repairs, fuel, registration and insurance on vehicles. Facility Costs are based on a percentage of the space costs for building usage, building and contents insurance, property taxes, improvements, renovations/construction and upkeep. Utilities include but not limited to cell phones, office phones, internet, water, sewer, power, gas, security system, trash, recycling, etc. Consumer Services include but not limited to nursing home diversion services, transportation, legal documentation, emergency and rent assistance. |
| Total Expenditures: \$ 900,000.00 | | | |